

IN THE
UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

JUKEN WASHINGTON GORDON X
Plaintiff, X
Reg No: 05373-088 X
U.S.P. ALLENWOOD X
POST OFFICE BOX-3000 X
WHITE DEER, PA. 17887. X

1: CV 01-03

Vs, .

CIVIL ACTION NO.

(TO BE FILED IN BY CI

N. GONZALEZ, Lieutenant Federal X
Correctional Institution Lewisburg). X
S. PUCKEY, SOS Officer, B. SHUMAN, X
SOS Officer, J.A. CANDELORA, S.O. X
Officer, G. SHUCK, SOS Officer, X
OFFICER MESSRS, Dr: POERIA. and X
UNITED STATES OF AMERICA, the indi- X
vidual Defendants are sued in the X
individual capacities and official X
capacities, Defendants. X

FILED
SCRANT

FEB 22 2

PER _____
DEPUTY

COMPLAINT.

COMES NOW, Juken W. Gordon the undersigned pro-se plaintiff, and brings this Civil action prusuant to BIVENS v. SIX UNKNOWN FEDERAL NARCOTIC AGENTS, 403 U.S. 388 (1971).

Prusuant to 28 U.S.C. § 1331 as well as 28 § U.S.C. 1346 (b). R emdy of the deprivation of his liberty interest created by Federal Regulations in remaining free from wronful cruel and unusual punish and fales imprisonment. Violation of due process and imposition of atypical and significant hardship in relation to the ordinary living prison at USP Lewisburg in September 9, 2000. The following facts a presented is support of this Bivens Action, and substantiate the vi tion of the undersigned's Civil and/or Constitutional right's as se by Federal Law and the United States Constitution

In support of this Bivens action the undersigned states as follows:

That on september 9, 2000 Lieutenant Gonzalez and Officer Puckey deliberately refused to allowed plaintiff to go eat in the messhall. Lieutenant Gonzalez and Officer Puckey then let a spanish inmate in the messhall to eat. Plaintiff then asked the Officers why he plaintiff was disallowed to go eat in the messhall? Lieutenant Gonzalez and Officer Puckey stated to plaintiff F--k you Nigga. We do what we want. Lieutenant Gonzalez told Officer Puckey to take plaintiff to the Lieutenant Office, Officer Puckey told plaintiff to placed his hands on the wall, which plaintiff did, as soon as plaintiff placed his hands on the wall Officer Puckey swept plaintiff legs away from under plaintiff and plaintiff fall to the ground. Lieutenant Gonzalez and Officer Puckey stated kicking and punching plaintiff, lieutenant Gonzalez and Officer Puckey also stated we are going to kill you Nigga. Lieutenant Gonzalez or Officer Puckey called for back-up Officer Shuman, Officer Shuck, Officer Candelora, Officer Messrs and other unknown officers ran into Lieutenant's Office and jump on plaintiff back. Plaintiff suffered injurys to his back and nack, due to the kicking punching and jump down on plaintiff back by Lieutenant Gonzalez, Officer Puckey, Officer Shuman, Officer Shuck, Officer Candelora, Officer Messrs, and other unknown officers.

Who also took plaintiff to the lock down unit, by holding plaintiff in the air. The officers then placed plaintiff into a cell, what is known as dry cell, without water or toilet for 4 to 5 hours, also plaintiff was placed in hand cuffed and leg iron for the same period of time in the dry cell. 45 minutes to a hour later Dr: Poeria came to see plaintiff in dry cell. Dr: Poeria asked plaintiff if he was feeling any pain or hurt. Plaintiff told Dr: Poeria that he was feeling a lots

of pain to his back and neck due to the brutal physical force of kicking punching and jumping down on plaintiff back. Dr: Poeria did not prescribed any medication for plaintiff pains, that plaintiff suffering from and still are suffering due to brutally physical force. Plaintiff wrote cop-out request on 9/10/2000 the following day to the Medical Care or P.A. to received Medical attention. However was unsuccessful in his request to Medical Care.

It wasnt untill september 12, 2000 when Mr: V. Factora made his round in the lock down unit plaintiff informed Mr:V. Factora about the pain plaintiff suffered to his back and neck. That was the first time plaintiff received medical care, Ibuprofen (800Mg) and Acetaminophen (325Mg) for his pain that he is suffering from.

Plaintiff suffered potential denial of or delay in access to Medical Care, when Medical Care was needed. Also Lieutenant Gonzalez Officer Puckey, Officer Shuman, Officer Shuck, Officer Candelora, Officer Messrs and other unknown Officers unnecessary use of brutal physical force when no force was needed. Also Plaintiff suffered cruel and unusual punishment as well as denial of equal protection against discrimination. When Lieutenant Gonzalez and Officer Puckey made clear distinction between plaintiff and the spanish inmate who they deliberately let in the messhall to eat. Plaintiff is a member of a racial minority.

Plaintiff was subsequently transfer from USP Lewisburg to USP Allenwood on november 8, 2000, plaintiff continued to received pain medication since plaintiff arrived at USP Allenwood. Dates are mention herein in which plaintiff received his medication, 11/9/2000, 11/20/2000, 12/5/2000. On december 19, 2000 plaintiff was placed on institution callout at USP Allenwood to see Dr: Reish Orthopedic Back Speci-

alist Dr: Reish stated in our conversation that he and plaintiff had on the 19th of december 2000 that plaintiff disc is mess-up, Dr: Reish also stated that plaintiff cannot received any surgery to his back. However, Dr: Reish recommended that plaintiff received extra matterss bottom bunk and continued taken medication according to Dr: Reish. The x-ray plaintiff did at USP Lewisburg Conclusively show subsequent inj-
 urys plaintiff received from kicking punching and jump donw on plaintiff back at USP Lewisburg, according to Dr:Reish examination that he did on december 19, 2000 at USP Allenwood. Also on january 9, 2001 Dr: J. Pannell at USP Allenwood order size medium back brace for plaintiff, but unfortunately was out of stock.

Dr: J. Pannell also taken plaintiff off Ibuprofen 600 and now placed plaintiff on Naproxen NA 275 Mg. Plaintiff was denied due process by lieutenant Gonzalez and Officer Puckey of basic human need such as food, also plaintiff was denied potential delay by Dr: Poeria in access to Medical Care. Plaintiff suffering from personal injurys, mental anguish, emotional distress, as well as migraneheadaches, also plaintiff in fear because of death threat by lieutenant Gonzalez and Officer Puckey.

Which imposed atypical and significant changes in plaintiff routine of prison life. Plaintiff filed administrative remedy PB8, but did not received any response. See administrative remedy BP8, BP9, BP10, BP11, with their response attached hereto as exhibits (A) and (B) exhibit (C) response of Counsel General exhibit attached hereto. exhibit (D) response from Regional Director Office, response to Freedom of Information Act, Filed by plaintiff see exhibit attached hereto. Also see Medical Report's as exhibit (E) attached hereto. Finally the arbitrary and capricious action of the defendants herein were in direct violation of Plaintiff Civil and Constitutional right's.

RELIEF.

Plaintiff state herein briefly exactly what plaintiff want this Honorable Court to do for plaintiff.

1. Plaintiff want the court to award Medical relief, declaratory and injunction relief, as well as \$5,000,000.00 dollars in compensatory and punitive damages.
2. Plaintiff demand a trial by jurys by the court and also asked the court to appointed counsel to represent plaintiff in this action.
3. Award of Attorney's fee and cost of this action if an attorney's is appointed to represent plaintiff by this court.
4. Plaintiff want the court to take survalance video tape and keep in the custody and controled of the court.
5. Any fuether relief's this Honorable Court deems just proper.

Prusuant to 28 U.S.C. § 1746, plaintiff Juken W. Gordon declares under the penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Respectfully Submitted

Juken Gordon


Juken Washington Gordon Pro-se
Reg No: 05373- 088 Nuit 1-A
U.S.P. Allenwood
Post Office Box- 3000
White Deer, PA. 17887.

Dated: Feb 19 2001.

CERTIFICATE OF SERVICE

I Juken Washington Gordon, Plaintiff pro-se certify under the penalty of perjury that i have served a copy of the foregiong pleadings upon the clerk of court in the Middle District of Pennsylvania at 235 north washington avenue post office box 1148 scranton, pennsylvania 18501- 1148.

Juken Washington Gordon



#05373-088 Pro se

U.S.P. Allenwood

P.O. Box 3000

White Deer PA. 17887.

Executed on Feb 19, 2001

ADMINISTRATIVE REMEDY.

JUKEN W. GORDON # 05373-088 OCTOBER 5, 2000 U.S.P LEWISBURG PA

This is a second written copy of my BP.8. The first one BP.8. was given to the S.I.S. Staff i saw the S.I.S. and sign a copy that he made from the computer, he told me inmate gordon that he was going to mail me inmate Gordon the orginal and also a copy that sign and have the S.I.A. Staff to come and see me inmate gordon about the incident. I inmate Gordon have not received a copy of the orginal BP.8. or the sign BP.8. from the S.I.S staff member. Just to note that the orginal(8) dated 9-10-2000. Also i have not see the S.I. A.

Inmate Gordon would like to explain to the coordinator that this is the exact quotation from my orginal BP.8. Lt. Gonzalez and Officer puckey refused to allowed inmate Gordon to go in the kitchen to eat. Lt. Gonzalez and Officer Puckey assault inmate Gordon in the Lt. Office. I was about to go in the kitchen i asked Lt. Gonzalez if i could go get something to aet? Lt. Gonzalez said no, i saw a spanish guy pass me and go to Lt. Gonzalez say something to Lt. Gonzalez and the spanish guy went in the kitchen.

I asked Lt. Gonzalez why he let the spanish guy in the kitchen, and i was here before him, and i asked you to let me go get something to aet. Lt. Gonzalez and Officer Puckey stated fuck you. These were their exact words you think you some tuff ass Nigga. We do what we want and let who we want in the kitchen. Lt. Gonzalez told officer Puckey to take me to the Lt's. Office when i went in the office, officer Puckey asked me to place my hands on the wall, which i did as soon as my hands were on the wall Officer Puckey swept my feet away from under me. I fell to the ground both Officer came down on me and started kicking and punching me all over my body, calling me Nigga saying we are going to kill you Nigga. I try to get up but i could not, one of the

EXHIBIT (A).

Officer called for back up about (15) officer run in the Office jump in my back, lift me up and take me out the office, down to the lock down unit. Holding me in the air the video camera will show everything the way i went to Lt's. Office and the way these officers took me to the lock down unit. This is the exact content of my orginal BP.8. Thank you for your time patience and concern in the above mention BP.8.

Dated: 10 - 5 - 2000

THE ORIGINAL BP.8. WAS HAND WRITTEN TO SIS STAFF.

Your truly

c.c. File


Juken W. Gordon

EXHIBIT (A).

U.S. DEPARTMENT OF JUSTICE
Federal Bureau of Prisons

REQUEST FOR ADMINISTRATIVE REMEDY

Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

From: Gordon Tuten W 05373-088 S.H.U Lewisburg
LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

Part A- INMATE REQUEST

On the 9-9-2000 I inmate Gordon was disallow to go and eat in inmate messhall, by L.t Gonzalez and officer Puckey. Who then let a Spanish inmate to go and eat in the messhall. When I inmate Gordon asked the Officer Why I was disallow to go in the messhall to eat. Both officers stated fuck you nigger. You think you some tuff ass nigger. Then the officers take me inmate Gordon to the L.t office, there Officer Puckey and L.t Gonzalez assault me and inflict harm to a human body. See B.P.8 for further detail, From S.I.S Staff. Tuten Gord, 9-28-2000.

DATE

SIGNATURE OF REQUESTER

Part B- RESPONSE

EXHIBIT (A).

Rec'd 10/2/00
Rec'd Back 10/6/00

10/24/00
DATE

Donald Rando
WARDEN OR REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER: 223296-F02

CASE NUMBER: 223296-F2

Part C- RECEIPT

Return to: Gordon Tuten W 05373-088 S.H.U Lewisburg
LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

SUBJECT: APPeal from the Administrative Remedy Response

10-25-2000
DATE

RECIPIENT'S SIGNATURE (STAFF MEMBER)

NAME: Gordon, Juken
REG. NO.: 05373-088
ADMIN. NO.: 223296-F2

ADMINISTRATIVE REMEDY RESPONSE

This is in response to your request for Administrative Remedy dated September 28, 2000, in which you allege a Correctional Officer and a Lieutenant would not allow you to eat in the dining room, verbally abused you in the corridor and then assaulted you in the Lieutenant's Office.

Accordingly, the Special Investigative Agent visited you in the Special Housing Unit at which time he took an affidavit from you listing these same allegations. These allegations were referred to the appropriate office for further direction and subsequently released to be investigated locally.

An investigation conducted by our Special Investigative Agent of the issues raised indicate there is no evidence to substantiate your complaints. Additionally, the staff members in question emphatically deny the allegations you have attributed to them.

Subsequently, this investigation has not revealed any evidence to substantiate the allegations you have submitted.

Based on the above information, the relief you request has been DENIED. If you are dissatisfied with this response, you may appeal to the: Regional Director, Federal Bureau of Prisons, Northeast Regional Office, U.S. Customs House - 7Th Floor, 2nd. & Chestnut Streets, Philadelphia, PA 19106, within twenty (20) calendar days from the date of this response.

10/24/00
Date

Donald Romine
Donald Romine, Warden

EXHIBIT (B).

U.S. Department of Justice

Regional Administrative Remedy Appeal

Federal Bureau of Prisons

Type or use ball-point pen. If attachments are needed, submit four copies. One copy of the completed BP-DIR-9 including any attachments must be submitted with this appeal.

From: Gordon Juken W 05373-088 S. H. U. Lewisburg
LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

Part A—REASON FOR APPEAL

APPeal from the administrative response
 The Prison system video camera will show that L.t. Gonzalez and officer Puckey did not allow me inmate Gordon to go and eat in the inmate messhall. Also the evidence will show that the officers take me inmate Gordon to the L.t. office and beat me up by kicking and Punching me inmate Gordon all over my body. Because from that beating I inmate Gordon suffer Pain to my back and neck which at Present time I am taking medication for the
 See copy attach hereto.

11-5-2000
DATE

Juken Gordon
SIGNATURE OF REQUESTER

Part B—RESPONSE

EXHIBIT (A).

DATE

REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the General Counsel. Your appeal must be received in the General Counsel's Office within 30 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER: 223296-R

Part C—RECEIPT

CASE NUMBER: 223296-R2

Return to: Gordon Juken W 05373-088 1-A-109 LEW
LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

SUBJECT: APPeal from the regional director
11-9-01

ATTACH TO ATTACH TO BP.10 APPEAL FROM THE ADMINISTRATIVE RESPONSE.

Pain that these officers inflict upon a human body. Also the evidence will show that the officers called me Nigga and saying they was going to kill me inmate Gordon.

The evidence also will show that about (15) officers run into the Lt's. Office and jump in on my back, that also cause me inmate Gordon pain to a human body. Thank you for your time patience and concern in this matter.

Dated: 11 - 5 - 2000.

THE ORIGINAL BP.10 WAS HAND WRITTEN AN SENT TO ADMINSTRATIVE REGIONAL DIRECTOR.

c.c. File

Your Truly


Juken W. Gordon

Juken W. Gordon
#05373-088
P.O. Box-1000
Lewisburg, Pa. 17837.

EXHIBIT (A).

GORDON, Juken

Reg. No. 05373-088

Appeal No. 223296-R2

Page One


Part B - Response

Your appeal concerns unprofessional staff at USP Lewisburg. Specifically, you contend that two staff members verbally abused you and assaulted you on September 9, 2000. You want the matter investigated.

Program Statement 3420.09, Employee Standards of Conduct, states that staff may not use brutality, physical violence, or intimidation toward an inmate, and may not use profane, obscene, or otherwise abusive language when communicating with inmates. As indicated by the Warden, your allegations were referred to appropriate staff for investigation, and found to be unsubstantiated. Furthermore, you received an incident report for attempted assault as a result of the September 9, 2000, incident, which you appealed in Administrative Appeal #223389-R1. Your allegations were also raised as defense to this incident report and found to be not supported. Your appeal is denied.

If you are dissatisfied with this response, you may appeal to the General Counsel, Federal Bureau of Prisons. Your appeal must be received in the Administrative Remedy Section, Office of General Counsel, Federal Bureau of Prisons, 320 First Street, N.W., Washington, D.C. 20534, within 30 calendar days of the date of this response.

Date: December 8, 2000



DAVID M. RARDIN
Regional Director

EXHIBIT (B).

U.S. Department of Justice

Central Office Administrative Remedy Appeal

Federal Bureau of Prisons

Type or use ball-point pen. If attachments are needed, submit four copies. One copy each of the completed BP-DIR-9 and BP-DIR-10, including any attachments must be submitted with this appeal.

From: Gordon Juken W 05373-088 1-A-109 U.S.P.-ALLENWOOD
 LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

Part A—REASON FOR APPEAL Appeal from the administrative regional director, The regional director did not address any of my issues. The evidence clearly established that Lt. Gonzalez and officer Puckey refused to allow me to go eat in the messhall. The evidence clearly show that officer Lt. Gonzalez made clearly distinction between the spanish inmate and myself, who they let go in to eat. Therefore, I was discriminated against. When I asked Lt. Gonzalez why I was disallow to go eat in the messhall, Lt. Gonzalez order officer Puckey to take me to the Lt.s. Office and Lt. Gonzalez and officer Puckey assaulted me in the Lt. office by kicking and punching me all over my body. One of the officers called for back up and about (15) officers included officer Messre officer Shuman ran into the Lt.'s office and jump on my back and neck because of the physical force that was use by Lt. Gonzalez and officer Puckey also officer Messre and Officer Shuman ran into the Lt.'s Office and jump on my back, which called for medical attention the regional director did not addressed none of these issues herein. Lt. Gonzalez and Officer Puckey clearly stated to me inmate Gordon, we are going to kill you nigga. Thank you for your time patience and concern in this matter.

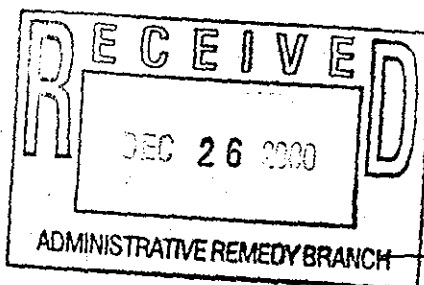
12-18-00

DATE

Juken Gordon
 SIGNATURE OF REQUESTER

Part B—RESPONSE

(EXHIBIT, (A))



DATE

GENERAL COUNSEL

ORIGINAL: RETURN TO INMATE

CASE NUMBER: 23296-4**Part C—RECEIPT**

CASE NUMBER: _____

Return to:

Gordon Juken W
 LAST NAME, FIRST, MIDDLE INITIAL

05373-088
 REG. NO.

1A
 UNIT

Allenwood
 INSTITUTION

SUBJECT: _____

Administrative Remedy No. 223296-A1**Part B - Response**

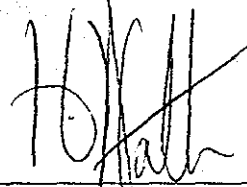
You appeal the Warden's response to your Request for Administrative Remedy concerning your allegations of unprofessional and assaultive conduct by staff at USP Lewisburg. You claim you were physically assaulted by correctional staff on September 9, 2000.

Staff conduct is governed by Bureau of Prisons' Program Statement 3420.09, Standards of Employee Conduct. An employee may not use brutality, physical violence, or intimidating, threatening or otherwise abusive language when communicating with inmates.

Our review reveals the Warden and the Regional Director have accurately and thoroughly addressed the issue you raised in your appeal. As indicated by the Warden, your allegations were referred to the appropriate staff for investigation and found to be unsubstantiated. Their investigation also revealed you received an Incident Report on September 9, 2000, for Attempted Assault, for which you also raised the same allegations in your defense. You have appealed the findings of the DHO in Central Office Administrative Remedy No. 223296-A1 which is currently pending. In your appeal to this office, you do not offer any additional information in substantiation of you claims. Accordingly, your appeal is denied.

Feb. 9, 2001

Date



Harrell Watts, Administrator
National Inmate Appeals

EXHIBIT (C)



U.S. Department of Justice

Federal Bureau of Prisons

Northeast Regional Office

U.S. Custom House - 7th Floor
2nd & Chestnut Streets
Philadelphia, PA. 19106

December 29, 2000

Juken Washington Gordon, Reg. No. 05373-088
United States Penitentiary - Allenwood
P.O. Box 3000
White Deer, Pennsylvania 17887

Re: Your Request For Information, Request No. 2001-1697

Dear Mr. Gordon:

This is in response to your request that was received by this agency on December 1, 2000, wherein you request a copy of any and all information regarding Incident Report No. 814074. You further request specific information regarding staff and a copy of a video on September 9, 2000, in the dining room.

In response to your request, eleven (11) pages were received in this office for a determination of their releasability to you. Upon review, it has been determined that these 11 pages are releasable to you and are enclosed herein.

In response to your request for a copy of the September 9, 2000, video tape taken in the dining room, this tape no longer exists.

In response to your request for specific information regarding staff, upon receipt of a signed authorization from each staff member whose records you seek, your request will be processed. However, release of this information without authorization would be a violation of the Privacy Act.

I trust that we have been responsive to your request.

Sincerely,

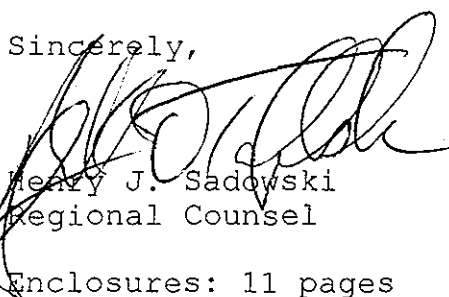

Henry J. Sadowski
Regional Counsel

EXHIBIT (D).

Enclosures: 11 pages

U.S. DEPARTMENT OF JUSTICE
Federal Bureau of Prisons

INMATE INJURY ASSESSMENT AND FOLLOWUP
(Medical)

1. Institution USP LEW	2. Name of Injured GORDON JULEN	3. Register Number 05373-088
4. Injured's Duty Assignment UNASSIGNED	5. Housing Assignment SHU STRIP CELL	6. Date and Time of Injury 09SEP2000 1125
7. Where Did Injury Happen (Be specific as to location)	Work Related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. Date and Time Reported for Treatment 09SEP2000 1153
9. Subjective: (Injured's Statement as to How Injury Occurred)(Symptoms as Reported by Patient)		
c/o KICKED IN HEAD. MY BACK HURTS. MY NECK HURTS. 15 OF THEM JUMPED ON ME.		
INMATE IN WAIST RESTRAINTS BEHIND THE BACK. Signature of Patient		
10. Objective: (Observations or Findings from Examination)	X-Rays Taken _____ Not Indicated <input checked="" type="checkbox"/> X-Ray Results	
ALERT AND AMBULATORY. WELL DEVELOPED. WELL NOURISHED. WELL HYDRATED. IN NO OBVIOUS DISTRESS. NO RLS, TREMORS, COUGH, OR OBVIOUS ABNORMALITIES. NO EVIDENCE OF RECENT TRAUMATIC LESIONS. BACK: NO DEFORMITY OR TENDERNESS TO PALPATION. FACE: NO DEFORMITIES OR RECENT TRAUMATIC LESIONS. HANDS: NO DEFORMITIES OR EVIDENCE OF RECENT TRAUMA		
11. Assessment: (Analysis of Facts Based on Subjective and Objective Data)		
INVOLVED IN RECENT PHYSICAL ALTERCATION. MAY HAVE SUSTAINED BLUNT TRAUMA TO CERVICAL.		
12. Plan: (Diagnostic Procedures with Results, Treatment and Recommended Follow-up)		
PATIENT EDUCATION CRUCIAL AND MENTIMENT UNDERSTOOD. ANKLE RESTRAINTS LOOSENED. ADVISED ON HOW TO OBTAIN A COPY OF THIS REPORT. FOLLOW UP ON SICK CALL AS NEEDED.		
13. This Injury Required:		
<input checked="" type="checkbox"/> a. No Medical Attention <input type="checkbox"/> b. Minor First Aid <input type="checkbox"/> c. Hospitalization <input type="checkbox"/> d. Other (explain) <input type="checkbox"/> e. Medically Unassigned <input type="checkbox"/> f. Civilian First Aid Only <input type="checkbox"/> g. Civilian Referred to Community Physician		

NSN 7540-00-634-4176

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
9/12/00 0740	<p>S. John J. Amato complaint of back pain which started last week end. Following immediate use of Force. He stated before no previous pain at this time. At times he has neck pain. Nothg of MD. Nothg.</p> <p>C. No evidence of neck or spine injury. L-S. Area. No evidence of deformity/swelling.</p> <p>A. LBP.</p> <p>Neck pain.</p> <p>PC Mediation Education was conducted.</p> <p>① Discuss the effects of the Mediation.</p> <p>② Understand the IP regime.</p> <p>③ Discuss the T-Cap to the P-C.</p> <p>X 7 days later (He was found).</p> <p>④ Accidents happen 3200 ft. Sub PO of 4-6 hr in P. pain. H. up.</p> <p>S-3.</p> <p>⑤ X-ray of the L-S area (AP) and neck (AP) request sent.</p> <p>⑥ NTC if necessary.</p>
	<p>Hospital or Medical Facility: USF LEW</p> <p>Status: HSE</p> <p>Department/Service: HSE</p> <p>Records Maintained At: HSE</p> <p>Sponsor's Name: Ammer S. Ammer, MD.</p> <p>SSN/ID NO.:</p> <p>Relationship to Sponsor:</p> <p>Patient's Identification: (For typed or written entries, give: Name - last, first, middle; D No or SSN; Sex; Date of Birth; Rank/Grade.)</p> <p>Register No.: 05373-084</p> <p>Ward No.:</p>

Vicarthur R. Factora
Physician Assistant

CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRM (41 CFR) 201-9.202-1

USF LEWISBURG

HEALTH SERVICES UNIT

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
9-18-00 0740 (SHU)	S: Requesting a refill of ibuprofen due to incident ^(w/) trauma which he received during an immediate use of force altercation.
	O: Saw no apparent physical injury. Able to ambulate w/ any obvious difficulty.
H/BS	A: Post-Traumatic LBP 2" to contusion. ① I prescribe 800 mg PO TID PRN x 5 d. (#15 tabs) ② Fill on SIC PRN if & persist — He understands. Prescribe 9/18/00 <i>M. Newton, PA-C</i> Anthony Bussanich, M.D. <i>USP, Lewisburg</i>
9/25/00 0840	S: 32 y/o male black who states he suffers is incapable for LBP/neck pain He has no idea of PUP. O: Ambulatory, vibrant and alert. Ant resp deter-
	A - LBP neck pain
H/BS	P: Medication Education was conducted ① Discuss the effects of the medication ② He understood the TX regimen ③ Naproxen 500 mg T cap PO bid x 7 days #14 (take with food)

NSN 7540-00-634-4176

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
9/25/00 0800	<p>Continue Tylenol 325mg TID PRN 8-6 pm PRN #24 5-25</p> <p>① MRP nursing</p> <p>Vicarthur R. Factora Physician Assistant</p>
9/26/00 0750	<p>S-The 32yo. male black, complaint of continuous sharp itchy sensation at frequently some predilectional shingles.</p> <p>On area of infection in the hairline/forehead noted intense pruritic discomfort on the hair/scalp</p> <p>A Rx Eczema Dermatitis</p> <p>① Medication Education was conducted</p> <p>② Discontinue the efforts of the medication</p> <p>③ Discontinue the Tx regime</p> <p>④ Administer Sulfamethoxazole-Trimethoprim one amount on the scalp three times daily with appropriate nursing. (all 6 H) 5-25</p> <p>⑤ MRP of nursing</p> <p>Vicarthur R. Factora Physician Assistant</p>

HOSPITAL OR MEDICAL FACILITY USP LEWISBURG Prison Services Unit Lewisburg, PA 17837	STATUS	DEPART./SERVICE HSC	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO. 05373-088	WARD NO.

CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)

Prescribed by GSA/ICMR

FIRM (41 CFR) 201-3-202-1

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
10/4/00 725	4/32 y 10 AA & C LBP d NAD, Anxiety, most of back good but part of LBP
SHU 215 <i>Chir</i>	(1) Iuprofen 800mg if no TID x 15 d (2) Tylenol if no TID x 15 d Rx TID + the discussed & indicated
	<i>[Signature]</i> N. Rodriguez-Miralles, MLP
10/16/00 730	S: Refill of Medication/s for <u>LBP</u> O: Stable, Vital Signs: BP: <u> </u> PR: <u> </u> <i>del</i> A: <u>LBP</u> P: Refill of the following medications (See below) Pt. Educ to follow previous instructions.
SHU 215	(1) Iuprofen 800mg + po TID x 30 d <i>[Signature]</i> N. RODRIGUEZ-MIRALLES PA
10/24/00 0231 S-223	S: 32 y 6 reports of relief of bp for LBP OR NAD @ this time A: 70 LBP P: Acetaminophen 325 TID 1st of the pain #24 (2) P.E. @ 1st of pain (3) Fbr reg SL of week 2. (4) PT under to be.
	<i>[Signature]</i> Anthony Bussanich, M.D. 10/24/00
	<i>[Signature]</i> Ivan Navarro, P.A.

USP LEWISBURG MEDICATION SHEET

1

Pharmacy Services
 USP LEWISBURG, PA 17837 570-523-1251

RX#09523284 N. RODRIGUEZ 07/01/99
 GORDON, JUKEN 05373-088
 TAKE 1 TABLET DAILY (SHU)

PYRIDOXINE HCL 50 MG TABLET #38
 JI 2 REFILL(S) EXPIRES 09/29/99

2

Pharmacy Services
 USP LEWISBURG, PA 17837 570-523-1251

RX#09523283 N. RODRIGUEZ 07/01/99
 GORDON, JUKEN 05373-088
 TAKE 3 TABLETS DAILY ON MONDAY AND THURSDAY

ISONIAZID 300 MG TABLET #3
 JI 2 REFILL(S) EXPIRES 09/29/99

3

Ord. Date 06/12/00 GORDON, JUKEN WASHINGT V. FACTO
 Exp. Date 05373-088
 06/18/00 APPLY SMALL AMOUNT AND
 MASSAGE. RINSE PROPERLY.

Rx # 12479
 COAL TAR SHAMPOO ML # 1

Ord. Date 06/19/00 GORDON, JUKEN WASHINGT F. ALAMA
 Exp. Date 05373-088
 07/18/00 APPLY SMALL AMOUNT ON THE SCALP
 TWICE WEEKLY WITH PROPER RINSING

Rx # 13048
 SELENIUM SULFIDE LOTION 2.5 # 1

4

6

Ord. Date 09/12/00 GORDON, JUKEN WASHINGT V. FACTO
 Exp. Date 05373-088
 09/18/00 TAKE ONE TABLET 3 TIMES A DAY
 AFTER MEALS

Rx # 19805
 IBUPROFEN 800 MG TAB # 21

Ord. Date 09/12/00 GORDON, JUKEN WASHINGT V. FACTO
 Exp. Date 05373-088
 10/11/00 TAKE TWO TABLETS BY MOUTH EVERY
 4 TO 6 HOURS AS NEEDED

Rx # 19806
 ACETAMINOPHEN 325 MG TAB # 24

Ord. Date 09/18/00 GORDON, JUKEN WASHINGT M. NEWTO
 Exp. Date 05373-088
 09/22/00 TAKE ONE TABLET 3 TIMES A DAY
 AFTER MEALS AS NEEDED

Rx # 20188
 IBUPROFEN 800 MG TAB # 15

Ord. Date 09/25/00 GORDON, JUKEN WASHINGT V. FACTO
 Exp. Date 05373-088
 10/01/00 TAKE ONE TABLET BY MOUTH TWICE
 DAILY FOR 7 DAYS

Rx # 20797
 NAPROXEN SODIUM 550 MG TA # 14

8

Ord. Date 09/25/00 GORDON, JUKEN WASHINGT V. FACTO
 Exp. Date 05373-088
 10/24/00 TAKE TWO TABLETS BY MOUTH EVERY
 4 TO 6 HOURS AS NEEDED

Rx # 20798
 ACETAMINOPHEN 325 MG TAB # 24

Ord. Date 09/26/00 GORDON, JUKEN WASHINGT V. FACTO
 Exp. Date 05373-088
 10/25/00 AS DIRECTED

Rx # 20921
 SELENIUM SULFIDE LOTION 2.5 # 1

Ord. Date 10/02/00 GORDON, JUKEN WASHINGT N. RODRI
 Exp. Date 05373-088
 10/16/00 TAKE 2 TABLETS THREE TIMES DAILY
 FOR 15 DAYS

Rx # 21247
 IBUPROFEN 400 MG TAB # 90

Ord. Date 10/02/00 GORDON, JUKEN WASHINGT N. RODRI
 Exp. Date 05373-088
 10/31/00 TAKE 2 TABLETS 4 TIMES DAILY FOR 15
 DAYS

Rx # 21245
 ACETAMINOPHEN 325 MG TAB # 120

Ord. Date 10/16/00 GORDON, JUKEN WASHINGT N. RODRI
 Exp. Date 05373-088
 11/14/00 TAKE ONE TABLET 3 TIMES A DAY
 AFTER MEALS

Rx # 22658
 IBUPROFEN 800 MG TAB # 15

Ord. Date 10/24/00 GORDON, JUKEN WASHINGT I. NAVARR
 Exp. Date 05373-088
 11/16/00 TAKE 3 TABLETS EVERY 4 HOURS AS
 NEEDED

Rx # 23553
 ACETAMINOPHEN 325 MG TAB

5

USP ALLENWOOD
Medication Profile

U.S.P. ALLENWOOD PHARMACY (570) 547-09
PO BOX 3500 - WHITE DEER, PA 17887
7426 J. HOLTZAPPL 12/20/00
GORDON, JUKEN WASHINGT 05373-088
ALP - Z02-227LAD
TAKE ONE TABLET AFTER MEALS
THREE TIMES DAILY AS NEEDED FOR
BACK PAIN

IBUPROFEN 600 MG TAB
(3) Re: 11/20/2000 RWS RXP 03/19/01
CAUTION: Federal law prohibits transfer of this drug
to any person other than patient for whom prescribed.
6313 C. FRIMPONG 11/20/00
GORDON, JUKEN WASHINGT 05373-088
ALP - Z02-227LAD
TAKE 2 TEASPOONSFUL FOUR TIMES
DAILY AS NEEDED

ALOH/MAG/SIMETHICONE PMS
(2) Re: 11/20/2000 RWS RXP 03/19/01
CAUTION: Federal law prohibits transfer of this drug
to any person other than patient for whom prescribed.
6064 J. BENNETT-M 11/09/00
GORDON, JUKEN WASHINGT 05373-088
ALP - Z02-227LAD
TAKE 1 TABLET 3 TIMES DAILY WITH
FOOD AS NEEDED

NSN 7540-00-834-4178

600-10

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT	TREATING ORGANIZATION (Sign each entry)
11/9/00 ORIO	St Pt @ LBP since ^{he was in} last institution. He claims he fell & hurt his back - twisted. He claims officers swept his feet out from under him.	
	① ATOX 3 / Amb	
	Neck - FRM - mild tenderness on (R) side when turning head to (L)	
	(R) tenderness on palp of sternocleidomastoid muscle on (R)	
	Back - (R) tenderness on palp lumbar spine & paraspinal muscle on (L) side in thoracic area	
	A/ Muscle Strain	
	P / (R) Ibuprofen 400mg TID x 10d (RFL 2) prn	
CDR. R. SUTODA, RPH	(2) xray lumbar spine	
USP	(3) ET/Se prn	

J. BENNETT-MEEHAN, PA-C
USP ALLENWOOD

Patient Medication Education Sheet(s) # 11/9/00

Dispensed with Medication PS Kuda RPR

Ord. Date GORDON, JUKEN WASHINGT J. BENNE
11/29/00 05373-088TAKE 1 TABLET 3 TIMES DAILY WITH
FOOD AS NEEDEDRx #
5064 IBUPROFEN 500 MG TAB # 30PATIENT'S IDENTIFICATION (Use this space for Mechanical
nprint)RECORDS
MAINTAINED
AT:

PATIENT'S NAME (Last, First, Middle initial)

RELATIONSHIP TO SPONSOR

SPONSOR'S NAME

DEPART./SERVICE

SSN/IDENTIFICATION NO.

SEX

RANK/GRADE

ORGANIZATION

DATE OF BIRTH

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 800 (REV. 5-84)

Prescribed by GSA and JGMR

FIRM (41 CFR) 201-45.505

USP Allenwood, PA

Brief ORTHOPEDIC CONSULT Note:

Inmate seen/examined by Dr Reish (Orthopedics)
and full note dictated; dictated note to follow

Date : 12/19/00 1000°

Inmate: GORDON # 05373-088

Interval note:

- ① OK FOR DOUBLE MATILASS
- ② MAY USE NSAIDs PRN
- ③ F/U PRN —
NO MAF, ETC. @ THIS TIME

Devan Chanmugam, M.D.
12/19/00

J. Pannell, PA-C
USP Allenwood

GORDON - 05373-088

USP ALLENWOOD

12-19-00

Mr. Gordon is 32 and he comes because he has discomfort in his low back. His history first starts in 1997 before he got incarcerated. This would have been in January or February of 1997. He was involved in an automobile accident in New York. He was seen by a private physician and had back pain. He was started on therapy, started on medication, and before he could finish his treatment he was incarcerated. This would have been around April. He says his back was really sore and it hurt. He had an MRI at that time. He is not exactly sure what it showed, but he doesn't think it showed anything of significance. He thinks his doctor told him that he had a fracture. He said his pain never really went away since that time and kind of lingered. It then got worse. He can't really relate to an episode that made it worse. He says that his pain is more constant now than it was then, he has it a significant amount of time. It is not associated with any leg pain at all and he has no radicular symptoms. It is not made worse by coughing or sneezing.

Also of significance is that he says when he was in the Lewisburg Federal Penitentiary he was involved in a situation where he was taken to the office, had to put his hands up against the wall, and then had his feet taken out from underneath him. He fell at that time. He called the police. He had really no radicular symptoms or, in my estimation, significant change.

Physical examination reveals that his forward flexion is good. His lateral bending is good. Straight leg raising is negative. Deep tendon reflexes of the knee and ankle are normal. Sensory examination is okay. Extensor hallucis longus rates a 5. He has no sciatic notch tenderness.

He has two films, AP and lateral. He has some hypertrophic formation at the superior endplate of L3, suggestive of an old fracture or osteoarthritic change. There is also accompanying disc space narrowing between L2 and L3, with a small osteophyte maybe on the superior aspect of L4. There does not appear to be any spondylolysis or spondylolisthesis. I don't have any obliques, but I don't see it on the lateral.

I think his problem is residual compression fracture with a disc that is deteriorating in that level, not

Dana Charnugan, M.D. 1/12



NSN 7540-00-834-4178

600-10

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE

SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)

12-20-00 D: Pt here c/o continued back pain just saw ortho

915

yesterday

O: Amb/NO/Ax3

A: Back pain

P: Motrin 600mg Tpo 70 pm #30 RF#3 Take c food

USP Allenwood bottom bunk x 6 months

Patient Medication Education Sheet(s) # 12/10/00

Dispensed with Medication

Ord. Date GORDON, JUKEN WASHINGT J. HOLTZ
12/20/00 05373-088TAKE ONE TABLET AFTER MEALS
THREE TIMES DAILY AS NEEDED FOR
BACK PAINRx #
7426

IBUPROFEN 600 MG TAB # 30

J. DeSanto/PA
USP Allenwood

1/3/01

1926

Lx #6313.

Arden I. Duttry, Paramedic
USP Allenwood

PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint)

RECORDS
MAINTAINED
AT:

ALP

PATIENT'S NAME (Last, First, Middle Initial)

SEX

RELATIONSHIP TO SPONSOR

STATUS

RANK/GRADE

SPONSOR'S NAME

ORGANIZATION

DEPART./SERVICE SSN/IDENTIFICATION NO.

DATE OF BIRTH

**UNITED STATES PENITENTIARY
ALLENWOOD, PENNSYLVANIA**

IDLE, CONVALESCENT AND CHANGE IN WORK CLASSIFICATION STATUS

TO: ALL CONCERNED

INMATE'S NAME: GordonUNIT: IADATE: 12-20-00DETAIL: Electrical shop REG. NO.: 05373-088

For Medical purposes, the inmate named above has been authorized the work and/or activity status listed below the reason(s) and the time shown.

MEDICAL CLASSIFICATION STATUS: (Check one and answer questions)

- () IDLE: Reason _____ THRU 12 MIDNIGHT _____, 19____
- () CONVALESCENCE: List any restricted activity for medical reasons. _____ THRU 12 MIDNIGHT _____, 19____
- () RESTRICTED DUTY: Specify exact restriction and reason. _____ THRU 12 MIDNIGHT _____, 19____
- () TOTALLY DISABLED: _____
- () FULL DUTY: OK for bottom bunk x 6 months Exp 5/19/01 Cell 1A

Physician or Physician Assistant

DEFINITIONS AND INSTRUCTIONS

IDLE STATUS - Temporary disability not to exceed three days duration including weekends and holidays. Restricted to room except for meals, barbering, religious services, sick call, visits and call outs. No recreation activity.

CONVALESCENT STATUS - Recovery period for operation, injury, or serious illness. Not less than four days and not to exceed thirty days subject to renewal. Excused from work and may not participate in any recreational activities outside the unit.

RESTRICTED DUTY - Restricted from specific activities because of physical or mental handicap. List handicap, work limitation and time period, either specific date or indefinite.

TOTALLY DISABLED - Totally unemployable and unassigned because of mental or physical reasons. Condition generally expected to last indefinitely.

FULL DUTY - No work restrictions because of physical, medical or mental disability.

WHITE - FILE COPY CANARY - MEDICAL RECORDS BLUE - DETAIL SUPERVISOR PINK - UNIT OFFICER

MEDICAL REPORT OF DU

ATOS

PATIENTS NAME

Gordon, Julian

HOSPITAL REGISTRATION NO.

05373-088

ADDRESS

FV - Food Service

INPATIENT	INCLUSIVE DATES OF TREATMENT			
	From:	Through:		
OUTPATIENT	DATE	TIME ARRIVED	A.M. / P.M.	TIME DEPARTED
	June 7/99	0800	(A.M. / P.M.)	
DISPOSITION	Can resume usual occupation	DATE	Can perform limited duties as specified under REMARKS	DATE
	June 09/99			
	To return to clinic	DATE	To be hospitalized	DATE
	OTHER (Specify)			

REMARKS

Quarters for 2 days - No Outside Recreation
- No Gym

NAME AND LOCATION OF HOSPITAL OR CLINIC

USP Lewisburg, PA

H80

SIGNATURE OF MEDICAL OFFICER OR MEDICAL RECORD LIBRARIAN

[Signature]
ALBERT FERDINAND N., PA

DATE

6/7/99

IHS-131 (1/89)

UNITED STATES PENITENTIARY
ALLENWOOD, PENNSYLVANIA

IDLE, CONVALESCENT AND CHANGE IN WORK CLASSIFICATION STATUS

TO: ALL CONCERNED
INMATE'S NAME:

GORDON

UNIT:

DATE:

12/19/00

DETAIL:

REG. NO.:

05373

For Medical purposes, the inmate named above has been authorized the work and/or activity status listed below the reason(s) and the time shown.

MEDICAL CLASSIFICATION STATUS: (Check one and answer questions)

- () IDLE: Reason _____ THRU 12 MIDNIGHT _____, 19 _____
- () CONVALESCENCE: List any restricted activity for medical reasons. _____ THRU 12 MIDNIGHT _____, 19 _____
- () RESTRICTED DUTY: Specify exact restriction and reason. _____ THRU 12 MIDNIGHT _____, 19 _____
- () TOTALLY DISABLED: OK FOR (1) (ONE) EXTRA
- () FULL DUTY: MATTRESS X (6) MONTHS

EXP 5/19/01

DEFINITIONS AND INSTRUCTIONS

Physician or Physician Assistant

[Signature]
DR

IDLE STATUS - Temporary disability not to exceed three days duration including weekends and holidays. Restricted to room except for meal, barbering, religious services, sick call, visits and call outs. No recreation activity.

CONVALESCENT STATUS - Recovery period for operation, injury, or serious illness. Not less than four days and not to exceed thirty days subject to renewal. Excused from work and may not participate in any recreational activities outside the unit.

RESTRICTED DUTY - Restricted from specific activities because of physical or mental handicap. List handicap, work limitation and time period, either specific date or indefinite.

TOTALLY DISABLED - Totally unemployable and unassigned because of mental or physical reasons. Condition generally expected to last indefinitely.

FULL DUTY - No work restrictions because of physical, medical or mental disability.

WHITE - FILE COPY CANARY - MEDICAL RECORDS BLUE - DETAIL SUPERVISOR PINK - UNIT OFFICER